

## UNITED STATES DISTRICT COURT

**FILED**

for the

Northern District of Texas

**September 12, 2022**

KAREN MITCHELL

CLERK, U.S. DISTRICT COURT

Lloyd Austin

)

Plaintiff/Petitioner

)

v.

U.S. Navy SEALs 1-26

)

Defendant/Respondent

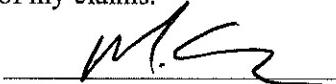
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Civil Action No. . . 4:21-cv-01236-O

**APPLICATION TO PROCEED IN DISTRICT COURT WITHOUT PREPAYING FEES OR COSTS  
(Long Form)****Affidavit in Support of the Application****Instructions**

I am a plaintiff or petitioner in this case and declare that I am unable to pay the costs of these proceedings and that I am entitled to the relief requested. I declare under penalty of perjury that the information below is true and understand that a false statement may result in a dismissal of my claims.

Signed:



Date: 03/31/2022

- For both you and your spouse estimate the average amount of money received from each of the following sources during the past 12 months. Adjust any amount that was received weekly, biweekly, quarterly, semiannually, or annually to show the monthly rate. Use gross amounts, that is, amounts before any deductions for taxes or otherwise.

| Income source                                     | Average monthly income amount during the past 12 months |         | Income amount expected next month |         |
|---|---|---------|-----------------------------------|---------|
|   | You   | Spouse  | You                               | Spouse  |
| Employment  | \$ 0.00   | \$ 0.00 | \$ 0.00                           | \$ 0.00 |
| Self-employment                                   | \$ 0.00   | \$ 0.00 | \$ 0.00                           | \$ 0.00 |
| Income from real property (such as rental income) | \$ 0.00   | \$ 0.00 | \$ 0.00                           | \$ 0.00 |
| Interest and dividends                            | \$ 0.00   | \$ 0.00 | \$ 0.00                           | \$ 0.00 |
| Gifts   | \$ 0.00   | \$ 0.00 | \$ 0.00                           | \$ 0.00 |
| Alimony   | \$ 0.00   | \$ 0.00 | \$ 0.00                           | \$ 0.00 |
| Child support                                     | \$ 0.00   | \$ 0.00 | \$ 0.00                           | \$ 0.00 |

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|  |                    |                |                    |                |
|--|--------------------|----------------|--------------------|----------------|
| Retirement (such as social security, pensions, annuities, insurance) | \$ 1,159.00        | \$ 0.00        | \$ 1,159.00        | \$ 0.00        |
| Disability (such as social security, insurance payments)             | \$ 2,093.40        | \$ 0.00        | \$ 2,093.40        | \$ 0.00        |
| Unemployment payments  | \$ 0.00            | \$ 0.00        | \$ 0.00            | \$ 0.00        |
| Public-assistance (such as welfare)                                  | \$ 0.00            | \$ 0.00        | \$ 0.00            | \$ 0.00        |
| Other (specify):   | \$ 3,332.06        | \$ 0.00        | \$ 3,332.06        | \$ 0.00        |
| <b>Total monthly income:</b>   | <b>\$ 6,584.46</b> | <b>\$ 0.00</b> | <b>\$ 6,584.46</b> | <b>\$ 0.00</b> |

2. List your employment history for the past two years, most recent employer first. (*Gross monthly pay is before taxes or other deductions.*)

| Employer | Address | Dates of employment | Gross monthly pay |
|----------|---------|---------------------|-------------------|
| N/A      | N/A     | N/A                 | \$ 0.00           |
| N/A      | N/A     | N/A                 | \$ 0.00           |

3. List your spouse's employment history for the past two years, most recent employer first. (*Gross monthly pay is before taxes or other deductions.*)

| Employer | Address | Dates of employment | Gross monthly pay |
|----------|---------|---------------------|-------------------|
| N/A      | N/A     | N/A                 | \$ 0.00           |
| N/A      | N/A     | N/A                 | \$ 0.00           |
| N/A      | N/A     | N/A                 | \$ 0.00           |

4. How much cash do you and your spouse have? \$ 100.00

Below, state any money you or your spouse have in bank accounts or in any other financial institution.

| Financial institution | Type of account | Amount you have | Amount your spouse has |
|-----------------------|-----------------|-----------------|------------------------|
| Police & Fire FCU     | Checking        | \$ 5.00         | \$ 0.00                |
| Wells Fargo           | Checking        | \$ 5.00         | \$ 0.00                |
|                       |                 | \$              | \$                     |

If you are a prisoner, you must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.

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5. List the assets, and their values, which you own or your spouse owns. Do not list clothing and ordinary household furnishings.

| <b>Assets owned by you or your spouse</b> |    |           |
|---|----|-----------|
| Home ( <i>Value</i> )                     | \$ | 0.00      |
| Other real estate ( <i>Value</i> )        | \$ | 0.00      |
| Motor vehicle #1 ( <i>Value</i> )         | \$ | 30,813.00 |
| Make and year: Ford 2020`                 |    |           |
| Model: Edge                               |    |           |
| Registration #: 2FMPK3G97LBB26272         |    |           |
| Motor vehicle #2 ( <i>Value</i> )         | \$ |           |
| Make and year: N/A                        |    |           |
| Model: N/A                                |    |           |
| Registration #: N/A                       |    |           |
| Other assets ( <i>Value</i> )             | \$ | 0.00      |
| Other assets ( <i>Value</i> )             | \$ | 0.00      |

6. State every person, business, or organization owing you or your spouse money, and the amount owed.

| <b>Person owing you or your spouse money</b> | <b>Amount owed to you</b> | <b>Amount owed to your spouse</b> |
|--|---------------------------|-----------------------------------|
| N/A  | \$ 0.00                   | \$ 0.00                           |
| N/A  | \$ 0.00                   | \$ 0.00                           |
| N/A  | \$ 0.00                   | \$ 0.00                           |

7. State the persons who rely on you or your spouse for support.

| <b>Name (or, if under 18, initials only)</b> | <b>Relationship</b> | <b>Age</b> |
|--|---------------------|------------|
| N/A  | N/A                 |            |
| N/A  | N/A                 |            |
| N/A  | N/A                 |            |

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8. Estimate the average monthly expenses of you and your family. Show separately the amounts paid by your spouse. Adjust any payments that are made weekly, biweekly, quarterly, semiannually, or annually to show the monthly rate.

|   | You                | Your spouse |
|---|--------------------|-------------|
| Rent or home-mortgage payment ( <i>including lot rented for mobile home</i> )<br>Are real estate taxes included? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>Is property insurance included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | \$ 1,456.00        | \$ 0.00     |
| Utilities ( <i>electricity, heating fuel, water, sewer, and telephone</i> )   | \$ 450.00          | \$ 0.00     |
| Home maintenance ( <i>repairs and upkeep</i> )  | \$ 200.00          | \$ 0.00     |
| Food  | \$ 1,200.00        | \$ 0.00     |
| Clothing  | \$ 600.00          | \$ 0.00     |
| Laundry and dry-cleaning  | \$ 300.00          | \$ 0.00     |
| Medical and dental expenses   | \$ 150.00          | \$ 0.00     |
| Transportation ( <i>not including motor vehicle payments</i> )  | \$ 400.00          | \$ 0.00     |
| Recreation, entertainment, newspapers, magazines, etc.  | \$ 350.00          | \$ 0.00     |
| Insurance ( <i>not deducted from wages or included in mortgage payments</i> )<br><br>Homeowner's or renter's: USAA  | \$ 100.00          | \$ 0.00     |
| Life:   | N/A                | \$ 0.00     |
| Health:   | N/A                | \$ 0.00     |
| Motor vehicle:  | USAA               | \$ 200.00   |
| Other:  | N/A                | \$ 0.00     |
| Taxes ( <i>not deducted from wages or included in mortgage payments</i> ) ( <i>specify</i> ):   | \$                 | \$          |
| Installment payments<br><br>Motor vehicle:  | Westlake Financial | \$ 560.00   |
| Credit card ( <i>name</i> ):  | VISA               | \$ 150.00   |
| Department store ( <i>name</i> ):   | AAFES              | \$ 200.00   |
| Other:  | DMV Fee            | \$ 25.00    |
| Alimony, maintenance, and support paid to others  | \$ 0.00            | \$ 0.00     |

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|  |                    |                |
|--|--------------------|----------------|
| Regular expenses for operation of business, profession, or farm ( <i>attach detailed statement</i> ) | \$ 0.00            | \$ 0.00        |
| Other ( <i>specify</i> ):  | \$ 0.00            | \$ 0.00        |
| <b>Total monthly expenses:</b>   | <b>\$ 6,341.00</b> | <b>\$ 0.00</b> |

9. Do you expect any major changes to your monthly income or expenses or in your assets or liabilities during the next 12 months?

Yes  No If yes, describe on an attached sheet.

10. Have you spent — or will you be spending — any money for expenses or attorney fees in conjunction with this lawsuit?  Yes  No

If yes, how much? \$ \_\_\_\_\_

11. Provide any other information that will help explain why you cannot pay the costs of these proceedings.  
As raised in the suit, Petitioner has incurred unexpected expenses through retaliation related activity.

12. Identify the city and state of your legal residence.  
Arlington, VA

Your daytime phone number: (856) 220-1354

Your age: 56 Your years of schooling: 16

IN THE UNITED STATES DISTRICT COURT  
FOR THE EASTERN DISTRICT OF VIRGINIA  
Richmond Division

MAJOR MIKE WEBB, d/b/a FRIENDS  
FOR MIKE WEBB (C00591537), a/k/a  
MAJOR MIKE WEBB FOR CONGRESS  
(H8VA08167),

Plaintiff,

v.

Civil Case No. 3:22cv47

FEDERAL ELECTION COMMISSION,

Defendants.

ORDER

On January 26, 2022, Plaintiff Michael D. Webb filed an application to proceed *in forma pauperis* and attached a verified Complaint. (ECF No. 1.) Webb is qualified to proceed *in forma pauperis*. Therefore, the Motion is provisionally GRANTED.

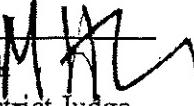
The Court has reviewed the proffered Complaint, which numbers forty-nine (49) pages and appears to allege that the Federal Election Commission improperly levied a fine against him during Webb's Congressional campaign. (*See, e.g.*, ECF No. 1-1, at 12.) Webb presents a smattering of allegations against the Federal Election Commission, including that it “[a]buse[d]” its discretion, that its decision was “[a]rbitrary and [c]apricious,” and that the fine violated the Eighth Amendment’s Excessive Fines Clause. (ECF No. 1-1, at 12, 21–22.) The proffered Complaint offends Federal Rule of Civil Procedure 8, which requires a short and plain statement of the grounds for this Court’s jurisdiction and Webb’s claims for relief.

The Court hereby ORDERS that the Clerk shall provisionally file the proffered Complaint; and it is further ORDERED that, no later than September 19, 2022, Webb SHALL

Let the Clerk send a copy of this Order and necessary forms to Webb at his address of record.

It is SO ORDERED.

Date: 8-19-2022  
Richmond, Virginia.

/s/   
M. Hannah Lauck  
United States District Judge

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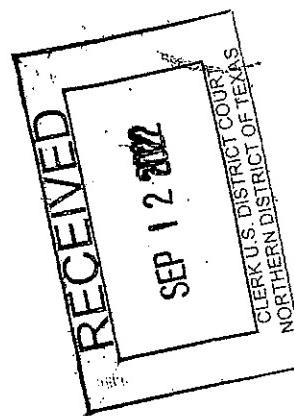


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**OKED ■ INSURED**

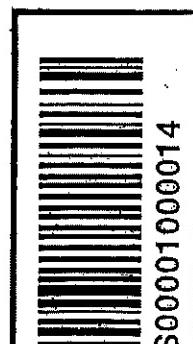
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955 S Columbus Street  
#426  
Attn: Dr. Fauci  
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Northern District of Texas  
501 West 10th Street  
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